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APPLICANTS

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Foreign Priority claimed	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no	Met after Allowance	STATE OR COUNTRY JAPAN	SHEETS DRAWING 6	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/>					
Verified and Acknowledged <i>[Signature]</i>	<i>[Initials]</i>	Examiner's Signature				

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TITLE

Imaging device and control method thereof

FILING FEE RECEIVED 950	<p>FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:</p>	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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